

BEST AVAILABLE COPY

MULTIPLE DEPEN. FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10 / 544219	FILING DATE							
						APPLICANT(S)								
CLAIMS														
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT				AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1						51								
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45						95								
46						96								
47						97								
48						98								
49						99								
50						100								
TOTAL IND.	1													
TOTAL DEP.	19													
TOTAL CLAIMS	20													